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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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REASEARCH TR	IANGLE PARK,	NC 27709				(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/773,361	02/06/2004		Hiroaki Kubo	Hiroaki Kubo JP920030		6820
TITLE OF INVENTION: P	POLARIZATION MO	DULATION WITH AM	PLITUDE DIFFERENTIAI	L		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/19/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	B1 BB 1884		1 290451 10773351
BAYARD, EMMANUEL		2611	375-279000	01 FC:1531 1440.69 DA 02 FC:1504 326.62 NA		
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list						
Change of correspon Address form PTO/SB/1	dence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys 1 David R. Irvin or agents OR, alternatively,			
*Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address"	' Indication form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
International Business Machines Corporation, Armonk, NY						
Please check the appropriate assignce category or categories (will not be printed on the patent):						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee						
Publication Fee (No		crmitted)	Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # o	f Copies		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0461 (enclose an extra copy of this form).			
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a. Applicant claims S			b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in			
interest as shown by the rec	ords of the United State	tes Patent and Trademark	Office.	ie applicant; a registi	ered attorney or agent; or tr	e assignee or other party in
Authorized Signature	David R	June	Date 26 July 2007			
Typed or printed name _	David R.	[rvin	Registration No. 42,682			
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